

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X678

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishm 421 Owner Owner's A 421 Person in C	Coffeent Address Alacdoress Charge	1 //1	Crossing umber and street, city, state, zip code) rles town Rd New Albany, IN Buts ria Bliss	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary	cØ	-19 -62		
· · · · · · · · · · · · · · · · · · ·	Daniel	Co	unningham 11-15-22	6. HACCP 7. Other (list)	12	<u></u>		
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"								
Section#	C/NC	R		·				
411	NC	R						
Received by (name and title printed): Olivia Bliss Shift lead Thomas Snider								
Received by (signature): Inspected by (signature): Short								

Coffee Crossing 1-9

	Floyd County Health Department Inspection Notes							
Gode# Greckies Code Code Code Code Code Code Code Code								
			PIC: Olivia 151:55 CFH: Panel Cun 11 show 11-15-22 Health Policy (Y) - N Food Code: (Y) N					
			CFH: Panel Con a 1/2 hou 11-15.22					
			Health Policy (Y) - N Food Code: (Y) N					
,	43/	NC	Cooler neur Service Sink					
			Storm racks near dryer					
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	4		und 3 comp					
		100						
	411	NC	light at 2 ft near back storm exilder					
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